

MANUAL: FOM 802	JOB AID Children's Foster Care
SUBJECT: Serious Emotional Disturbance Waiver (SEDW) Job Aid	11/2021 New Issue Partial Revision
Contact Office: Erica Barrett, BarrettE1@michigan.gov Child Welfare Medical and Behavioral Health	09/2022 Complete Revision

The children's SEDW provides services that are enhancements or additions to the Medicaid State Plan coverage for children through age 20 who meet eligibility requirements. The SEDW enables Medicaid to fund necessary home and community-based services for children with SED who meet the criteria for admission to the state inpatient psychiatric hospital and are at risk of hospitalization without waiver services. Wraparound is a required service for the SEDW. A child in foster care is eligible for the waiver if all the following apply. The child:

- Is under the age of 18 at the time of the initial approval.
- Resides with his/her birth parent, a relative, or in a foster home that is willing to commit to caring for the child for at least one year.
- Has a primary Diagnostic and Statistical Manual of Mental Health Disorders (DSM) mental health diagnosis.
- Meets CMHSP contract criteria for and is at risk of inpatient hospitalization in the state psychiatric hospital.
- Demonstrates serious limitations that impair his/her ability to function in the community.

To determine if a child is eligible for SEDW services, please complete the following steps:

If a child is currently receiving CMHSP services:

- Assess to see if the child needs an enhanced array of services offered by the SEDW.
- Referring caseworker should speak with CMH provider.
- DHHS SEDW Lead should follow up with CMH SEDW Lead about SEDW referral.

If a child is NOT currently receiving CMHSP services:

- Family/caregiver of the potentially eligible child should contact CMHSP Intake/Access Center and specifically request assessment for the SEDW.
- CMHSP will determine if the child is eligible for the SEDW.

If the child is placed in a QRTP and has an identified next placement, the child can be assessed for the SEDW. If approved, SEDW services will not go into effect until the child is discharged from the QRTP and placed in the community.

If it is determined that the child is eligible for the SEDW, the family will be referred to Wraparound. Wraparound is responsible for orienting the family to the SEDW and completing the SEDW application. As part of the application process, Wraparound is responsible for securing the appropriate signature on the SEDW Family Choice Assurance Form.

NOTE: If the child is a temporary court ward, the parent/legal guardian must sign the Family Choice Assurance form. Foster parents cannot provide consent. The caseworker may sign only if there is a court order specifically stipulating that the caseworker has legal authority to sign consent for the SEDW. If the child is an MCI ward, Mary Chaliman with the Child Welfare Medical and Behavioral Health Division must sign the Family Choice Assurance Form. If the child is a permanent court ward, the judge must sign the Family Choice Assurance Form.

When the SEDW is approved, an auto-generated email is sent by the Waiver Support Application (WSA) to the SEDW lead at the CMHSP. The CMHSP lead is responsible for providing the email to both the MDHHS SEDW lead and the Wraparound facilitator. The Wraparound facilitator is responsible for notifying the family and team that the SEDW is approved. The MDHHS SEDW lead is responsible for providing the approval notification to the caseworker. The caseworker is responsible for completing the DHS-1254, SED Waiver Payment Request and Approval, and the SEDW payment authorization in MiSACWIS. Completion of the DHS-1254 and SEDW payment authorization allows the foster parent or relative caregiver to receive an elevated per diem for participating in SEDW services.

NOTE: The SEDW approved rate is only applicable to foster care payments. If a caregiver is eligible to receive a higher rate for the child (DOC or TFC), the higher rate should be given.

For the foster parent or relative caregiver to receive the elevated per diem, the caseworker must complete the following steps:

1. Complete the DHS-1254.
 - a. Meet with the foster parent/relative caregiver to discuss the expectation of the SEDW services.
 - b. The caregiver, caseworker, supervisor, and county director must sign and date the DHS-1254. The behavioral health analyst will sign the DHS-1254 upon review of the SEDW payment authorization in MiSACWIS.
2. Complete the SEDW payment authorization in MiSACWIS.
 - a. Go to the child's case in MiSACWIS.
 - b. Go to the placement section and select 'Authorization' next to the child's placement.
 - c. Under the 'Add on Summary' select 'Add Amount'.
 - d. Select 'Determination of Care' as the 'Cost Reason'.
 - e. Enter the 'Effective Date' and 'End Date'. The effective date will be the date noted on the WSA SEDW approval email. The end date will be 1 year from the begin date.
 - f. Select 'Determination of Care'.
 - g. Select the 'SED Waiver' tab.
 - h. Upload the completed DHS-1254, WSA SEDW approval email, and any additional supporting documentation.
 - i. Click 'apply' to save the SEDW payment authorization.
 - j. Select 'select' next to the pending SEDW payment authorization.
 - k. Select 'Approval' to route the SEDW payment authorization to supervision.
 - i. After reviewing the SEDW authorization, the supervisor will route the SEDW payment authorization to the county director. The county director will review the SEDW authorization and route it to the behavioral health analyst for review.
 - ii. The behavioral health analyst will review the SEDW payment authorization, DHS-1254, WSA SEDW approval email, and any additional supporting documentation. If the SEDW authorization is accurate, the behavioral health analyst will sign and

upload the DHS-1254 and route the SEDW payment authorization to Federal Compliance Division for final approval.

Resources:

1. FOM 802
2. MiSACWIS Job Aid: Completing a Determination of Care Record
3. Child Welfare Medical and Behavioral Health Resources Website:
[MDHHS - Child Welfare Medical and Behavioral Health Resources \(michigan.gov\)](#)
4. Foster Mental Health Website:
[MDHHS - Fostering Mental Health \(michigan.gov\)](#)